

2018 MONTANA LARGE OR SMALL QUANTITY HAZARDOUS WASTE GENERATOR REPORT

This report is for the calendar year ending December 31, 2018. Please read all instructions in the 2018 Hazardous Waste Report Instructions Booklet before making any entries on the form. PLEASE TYPE / PRINT

State Use Only	Inspector:
RCRAInfo	<input checked="" type="checkbox"/> NRR
CEDARS	

PART ONE Generator Information

Mailing Date: January 2, 2019

I	GENERATOR STATUS DURING 2018 See instructions for generator status definitions and check correct box.		Actual Generator Status during 2018		<input type="checkbox"/> Large Generator	<input type="checkbox"/> Non-Handler	2018 REGISTERED STATUS
				<input checked="" type="checkbox"/> Small Generator	<input type="checkbox"/> Out of Business		
				<input type="checkbox"/> Conditionally Exempt Generator	<input type="checkbox"/> Short Term/ One Time	SQG	
II	EPA ID # / DEQ CONTACT		MTR123456789			CEM	
III	SITE NAME		ABC COMPANY LLC			ABC COMPANY INC	
IV	SITE LOCATION ADDRESS	Address	123 MAIN ST				
		City	State	HELENA		MT	
		Zip	59601				
V	CONTACT PERSON First MI Last		ROBERT	S	SOCKS		
	TITLE					President	
	TELEPHONE	EXTENSION	406-442-1234	12			555
	MAILING ADDRESS	Address	PO BOX 123				
		City	State	HELENA		MT	
		Zip	59624-0123				
	FAX NUMBER		406-442-1233				
EMAIL		bobbysocks@abccompany.com					
VI	ALTERNATE CONTACT First MI Last		DANIEL	A	BOONE	Larry	B Socks
	TITLE					Vice President	
	TELEPHONE	EXTENSION				406-442-5678	123
	EMAIL					larrybsocks@abccompany.com	
VII	SITE LEGAL OWNER					ABC COMPANY INC – BUILDINGS / ACME PROPERTY MANAGEMENT - LAND	
VIII	CERTIFICATION		I certify under penalty of law that this document and all attachments were prepared under my direction or supervision according to a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. (40 CFR 270.11).				
▼ (Please Type or Print) ▼							
Name First MI Last		ROBERT	S	SOCKS	Signature	ROBERT S SOCKS	Date Signed (mm/dd/yyyy)
Title		PRESIDENT					

PART TWO – Waste Identification (See Instructions) (Please make copies of this sheet for additional pages)

A	B	C	D	E		F	G	H	
Line #	Is this Remediation Waste? Place 'X' in box if Yes	Description of Waste	EPA Hazardous Waste Codes (D001, D002...)	Amount of Waste Generated	Unit of Measure		Amount Shipped Off-Site	Waste Minimization Code (see Instructions, page 4)	Transporter (T) EPA ID Number (#) & Name
					Density				Receiving Facility (R) EPA ID Number (#) & Name
1	<input checked="" type="checkbox"/>	WASTE COMBUSTIBLE MATERIALS	D039, D040	.744	G		.744	X	T # NED986382133 T Name Smith Systems Trans. Inc. R # ARD069748192 R Name TERIS LLC
2		WASTE PAINT RELATED MATERIALS	D001, D006, D035, F003	.166	T		.166	X	T # NDD9806967070 T Name SAFETY KLEEN SYSTEMS R # ILD980613913 R Name SAFETY KLEEN SYSTEMS
3		WASTE PAINT RELATED MATERIALS	D001, D006, D035, F003,	200	P		100	X	T # NDD9806967070 T Name SAFETY KLEEN SYSTEMS R # LD980613913 R Name SAFETY KLEEN SYSTEMS
							100	X	T # NDD9806967070 T Name SAFETY KLEEN SYSTEMS R # ARD069748192 R Name TERIS LLC
									T # T Name R # R Name
									T # T Name R # R Name

Comments

Line 2, initial Transporters: MTR000002832, Schumaker Trucking .1 tons, NDDD9806967070, Safety Kleen Systems .066 tons

Line 3. F005